# **Utah's Division of Child and Family Services**

# **Southwest Region Report**

# **Qualitative Case Review Findings**

Review Conducted September 19-22, 2011

A Report by

The Office of Services Review, Department of Human Services

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## I. Introduction

The Southwest Region Qualitative Case Reviews (QCR) for FY2012 was held the week of September 19-22, 2011. Reviewers were selected from the Office of Services Review, the Division of Child and Family Services, community partners and other interested parties. Reviewers also included individuals from the Department of Human Services Executive Director's Office, Division of Juvenile Justice Services, and Utah Foster Care Foundation.

There were 20 cases randomly selected for the Southwest Region review. The sample included 14 foster care cases and six in-home cases. Six of the seven offices in the region had cases selected as part of the sample, namely the Cedar City, Kanab, Manti, Panguitch, Richfield, and St. George offices. Only the Panguitch office did not have a case selected due to the small size of the office. A certified lead reviewer and shadow reviewer were assigned to each case. Information was obtained through in depth interviews with the child (if old enough to participate), his or her parents or other guardians, foster parents (if child was placed in foster care), caseworker, teacher, therapist, other service providers, and others having a significant role in the child's life. Additionally, the child's file, including prior CPS investigations and other available records, was reviewed.

Staff from the Office of Services Review participated in a meeting with region staff on November 17, 2011 to review the results of the region's QCR. Members of the Division's Policy and Practice Improvement Team also participated. Preliminary scores, data analysis, and stakeholder feedback were reviewed with the region. Strengths and practice improvement opportunities identified in the case debriefings were also presented.

## **II. System Strengths**

During the Qualitative Case Review process, many strengths were observed and identified regarding the system and case management. At the conclusion of each two-day review period, the reviewers met together for a debriefing session during which a brief summary of each case and the reviewers' observations were presented and discussed with the other reviewers. As part of the debriefing process, each review team was asked to present two or three strengths on their case that had a positive impact on outcomes. The list below is a summarized list of strengths identified by the reviewers. This is not an exhaustive list of all the strengths mentioned during the review process.

### Safety

- There is an excellent safety plan in place that was created in partnership with law enforcement.
- A thorough safety plan was created before a child was placed in the foster home so the child was denied access to items she had been using to harm herself.

#### **Stability and Placement**

- The child has had the same caseworker, therapist, and school teacher for the three years he has been in care.
- The foster parent is a former DCFS employee who understands how much children need permanency. He understands the system and knows how to activate resources when they are needed.
- The foster home is a good match to the child's needs. They are helping to improve the health status of the child. The foster parents also work to maintain connections between the child and members of his extended family.
- The foster parent is transporting the child quite a ways in order to maintain the child in the same school and seeing the same therapist.
- The child has been in the same home for three years.

## **Family Connections**

- The child has very few connections, so the team has worked to maintain contact between the child and an aunt and grandmother.
- Although the parents aren't able to care for the child, a strong connection to them has been maintained while the child has been in foster care.
- Mother was invited to participate in the child's medical visits while the child was in foster care.

#### **Engagement**

- The caseworker did a great job of engaging the father.
- The child was placed in a foster home that had been selected by the father.
- The worker scheduled appointments around the father's schedule so he could participate fully in planning and decision making.

• DCFS has encouraged the mother to participate in teaming by offering transportation, hotel accommodations, and arranging visits after team meetings.

## **Teaming**

- Team meetings were held more frequently than usual because of the demands of the case.
- The team has included the tribal social worker to coordinate services.
- Extended family members have continued to have contact with the child while he is in foster care.
- There is a large team that is working together well in spite of the distance between team members.
- The maternal grandmother was included in team meetings.
- Although team members had different opinions about how the case should proceed, through purposeful team meetings they were able to come to a consensus and move the case forward.
- All team members feel they have a voice in the case.
- The tribe was notified the child was in foster care and had an opportunity to be involved if they had chosen to do so.

### **Assessment**

• The proctor agency makes good use of the Ansell-Casey Life Skills Assessment to identify independent living skills and prepare youth to live on their own.

## **Long-Term View**

- Arrangements are already made so that when the child ages out of DCFS, he will immediately transition to DSPD services yet be able to remain in the same home.
- The team all shares the same vision of what permanency will look like for the child.

#### **Intervention Adequacy**

- The Paiute tribe provides counseling services in the home and has assigned a tribal social worker.
- The child was recently placed in a structured foster home. This is a better match for the child's needs and the child's behavior is improving.
- The child's unusual and challenging medical condition was being treated well.
- The child has a very good relationship with the CASA worker who has been on the case for five years.
- The team was able to make special arrangements for the child to receive treatment from the provider the family preferred.
- An advocate was provided to the youth to meet with him once per week in order to build the youth's social skills and help with homework.
- The school was doing an excellent job for the child. The principal would not give up on the child, there was a very good IEP with a behavioral plan in place, and the resource teacher was wonderful.

## **Tracking and Adaptation**

- Mother could not attend domestic violence treatment during the day when group sessions were held, so the arrangements were made for her to complete the treatment through individual sessions.
- The worker has been the same for both the foster case and the in-home case, so tracking has been consistent.

## III. Stakeholder Observations

The results of the QCR should be considered within a broad context of local and regional interaction with community partners. Each year the Office of Services Review interviews key community stakeholders such as birth families, youth, foster parents, providers, representatives from the legal community, community agencies, and DCFS staff. This year the Qualitative Case Review in the Southwest Region was supported by a total of 15 stakeholder interviews. There were seven focus groups which included DCFS caseworkers, DCFS supervisors, the Region Administration Team, foster parents, and one of the region's Quality Improvement Committees. There were also eight individual interviews including a private provider placement agency, Guardian ad Litem, a therapist, a residential placement provider, judges, Utah Foster Care Foundation, and the DCFS Southwest Regional Director.

The information from the stakeholders' observations has been organized around broad topics discussed during the focus groups and interviews. Obviously, not everyone commented nor agreed on all topics. Where there appeared to be some consensus, the comments are noted.

#### **STRENGTHS**

#### In-home services

Region staff feel the strengthening of the in-home services program is exciting. The region administrative team would like to divert foster care cases to in-home services. DCFS is trying to do more in-home cases, but it's challenging because intake takes only the worst cases so they have to go straight to foster care. DCFS would like to do more in-home cases when they have a choice. Judges have noticed a trend toward more in-home cases.

## Responsiveness and Visibility of the Regional Director

The regional director has participated in foster parent training, which really meant a lot to foster parents. She validated the work that foster parents do. She listened to their opinions. She fixed some things in specific situations. Because of that, some who had intended to quit being foster parents decided to continue.

## **Technology Updates**

The updates in technology have really been good for workers. Workers are more efficient and able to do more. They can access databases while working out in the field. They have constant access to email and can respond to email continuously. Foster parents like that caseworkers are getting up to date with technology so they can now receive texts and emails on their phones so they can respond to foster parents immediately. Foster parents are finding it's much easier to get hold of workers.

## Transition to Adult Living (TAL) Program

There were 12 youth from the area who attended the Youth Summit last year. This year 30 youth attended. The TAL program is growing and gaining steam.

## **National Recognition**

According to one judge who was interviewed, at national conventions Utah is singled out as doing a good job both in the courts and DCFS. People in Utah are invested and are doing the right thing for the right reason. For example, Utah was noted at the National Conference on Juvenile court Judges.

#### Children's Justice Center

Due in large part to the efforts of a dedicated DCFS administrator, a new Children's Justice Center was opened in Sevier County. Another will soon open in Sanpete County. These new centers are the culmination of a broad-based community effort.

## **Using QCR Results**

Due to the results from the Qualitative Case Review last year, the region has been working on making Child and Family Plans more specific to the needs of the family. Plans are being tailored to individual families. The Southwest region uses QCR stories and the report. Stories are taken back to every team and good and bad examples of practice are discussed. They talk about how outcomes could have been different. The training team adapts training to put more emphasis on indicators that didn't score well. Barriers to improving outcomes are spelled out in the stories.

#### **Caseworker Commitment**

In spite of all the challenges, workers do what they do because they like what they do, they just wish they had more support to help them do their job. They feel gratified when they see they have helped a family. They like being part of a team and feeling supported by their co-workers and find it analogous to the bonding the soldiers experience in fox holes. They feel supported by other offices within the region.

## **QIC Committee**

The QIC committee is a good resource that links the public with DCFS, finds answers to child welfare problems, and presents concerns to DCFS. The committee pooled its resources to create a Strengthening Families conference that trained professionals as well as families. The committee works well with DCFS. The Division provides the committee with data, information, and education.

#### **CHALLENGES**

#### **Adoption Disruptions**

Because the behaviors of adopted children seem to be more difficult now than in past years, adoptive families are struggling to manage the behaviors of the children they've adopted. DCFS is doing lots of therapy with adoptive families trying to preserve children's placements. By the time DCFS gets involved with these families, the behaviors have escalated to the point that the placement is threatening to disrupt. DCFS would like to get involved earlier before things escalate, so they are working on providing more up front services to adoptive families.

### **Providers**

Providers require revenue to operate and provide services. The environment among providers has become very competitive due to Medicaid changes and budget cutbacks. This can lead to providers vying with one another to provide services. For example, providers prefer to provide both the placement and the therapy for the child, though it may be in the child's best interest to have the services provided by separate providers. The 16-bed rule for Medicaid has led to a very difficult environment for providers. Due to this change DCFS is concerned that some providers may not be able to maintain operation.

#### **Foster Homes**

Utah Foster Care Foundation (UFCF) is having a more difficult time recruiting foster parents. Many of the homes they are licensing are kinship placements for specific children instead of regular foster homes. Foster parents and UFCF both feel the daily payment rate has got to be raised. Both groups voiced the irony that it costs \$25 per day to kennel a dog, but foster parents are only paid \$13 per day to care for a child. Foster parents feel like they are at the bottom of the food chain. Proctor agencies get the best foster parents because they can pay more. Proctor agencies pay double what DCFS foster parents get paid. UFCF fought for years to get an additional dollar per day for foster parents and then it was taken away. The Legislature is ruining DCFS's most valuable resource.

## Change to Domestic Violence (DV) Statute

Lots of domestic violence cases have an underlying unemployment or under employment issue. The changes the Legislature made to domestic violence statute were very frustrating. Whether or not a case is accepted by DCFS now depends on how law enforcement writes their report. If the report doesn't state that children were in the room and that they were upset, intake won't take the report. Southwest region is losing their DV team. That will be a huge loss to the region. There are DV issues in almost every case. They are very concerned about DV cases not being accepted by intake. They are very fearful the DV will become more and more lethal. Workers feel the changes to DV laws have set the state back about 20 years.

#### **Employee Morale**

The only two workers one office has are both looking for new jobs. Workers can't be recruited because the pay is too low. No raises for the past several years, high caseloads, and harder cases are all negatives. The five-day work week doesn't give workers time to recuperate over the weekend from the stress they've experienced during the week. Morale has been down for a long time. Health insurance goes up but there is no raise to compensate for it, so workers take home less money each year. Two of the workers on one team are on food stamps. Workers have to deal with increasingly angry and contentious clients. Workers worry more about their personal safety on the job. Community members are campaigning against the agency and forming protests. Workers won't tell people in the community that they work for DCFS. Workers believe turnover is high because people get into the job and then figure out that it's not worth it, so they quickly leave.

#### **CANS** Assessment

Many caseworkers think the CANS assessment is yet another additional requirement having to be performed. They feel they have yet to see any positive outcomes as a result of its implementation. They believe two similar children can have very different outcomes on the CANS assessment. They feel the CANS is good as far as the initial assessment of placement for the child, but lack of available resources and the limited budget seem to them to drive where children are placed regardless of what the CANS assessment indicates the child needs. There is also a perception among some workers that administration requires that children start in a basic placement and work their way up regardless of what the CANS assessment indicates. Administration was surprised and concerned to learn of this perception and is discussing how to assure workers that such is not the case. Workers believe the CANS assessment gives them a placement level, but to understand the child's needs they still need to do the Child and Family Assessment. They feel the CANS assessment is just one more thing they have to do, and it makes cases harder to transfer because a CANS assessment must be completed before a case can be transferred. They feel the residential screening committee does a better job of knowing where children should be placed, and they worry that the tool is overriding professional judgment. A few workers see some benefits to the CANS assessment because it verifies what they already knew about the child.

#### **Centralized Intake**

There are concerns both within DCFS and among the community that Centralized Intake does not accept referrals that the regions would have accepted. It's unclear both to DCFS staff and to the community whether or not the region can override the decision of Centralized Intake to accept a referral or not.

#### **TRENDS**

#### **Increasing Drug Use**

Prescription medication and heroin are the reason many families become involved with DCFS. Families turn to prescription medications to relieve stress that is largely due to economic conditions. This includes middle and upper middle class families who haven't traditionally become involved with DCFS. Drug use in cases is more severe than it used to be. Parents are using harder drugs and they are using multiple drugs rather than a single drug.

#### **Economic Downturn**

Single parent and two-parent/unemployed families are increasing. Parents are doing piece work or part-time fast food jobs, yet they have kids with high special needs. If the economy improved, they might be able to barely get by. They are seeing more families who are not skilled, uneducated, and unemployed. Partners and the community are pulling back the support they've offered in the past because they have to deal with their own budget problems. They can't provide what they used to provide to DCFS families.

# IV. Child and Family Status, System Performance, Analysis, and Trends

The QCR findings are presented in graphic form to help quantify the observations of the qualitative assessment. Graphs show a comparison of scores for past years' reviews with the current review. The graphs of the two broad domains of <u>Child and Family Status</u> and <u>System Performance</u> show the percent of cases in which the key indicators were judged to be "acceptable." A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using these rating scales. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status and System Performance are evaluated using 15 key indicators. Graphs presenting the overall, summative scores for each domain are presented below. They are followed by graphs showing the distribution of scores for each indicator within each of the two domains.

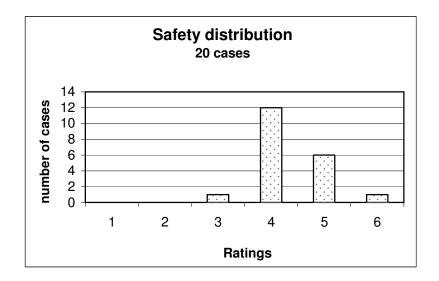
## **Child and Family Status Indicators**

## **Overall Status**

Southwest Child Status											
	# of	# of	St	tandard: 70% on all indicators	FY07	FY08	FY09	FY10	FY11	FY12	
	cases	cases	ех	cept Safety which is 85%						Current	
	(+)	(-)	St	tandard: Criteria 85% on overall score						Scores	Trends
Safety	19	1	1	95.0%	91%	92%	96%	96%	88%	95%	Improved and above standard
Stability	15	5	0	75.0%	65%	71%	71%	75%	71%	75%	Improved and above standard
Prospect for Permanence	13	7	7	65.0%	61%	71%	67%	75%	63%	65%	Improved but below standard
Health/Physical Well-being	20	0	0	·····1:00: <b>0</b> %	100%	100%	100%	100%	100%	100%	Status Quo and above standard
Emot./Behavioral Well-being	17	3	3	85.0%	87%	83%	96%	96%	92%	85%	Decreased but above standard
Learning	16	4	4	80.0%	100%	96%	92%	92%	92%	80%	Decreased but above standard
Family Connections	8	4	4	66.7%						67%	Below standard
Satisfaction	20	0	0	100.0%	100%	83%	92%	83%	79%	100%	Improved and above standard
Overall Score	17	3	3	85.0	91%	92%	96%	96%	88%	85%	Decreased but above standard
			0	% 20% 40% 60% 80% 100%							

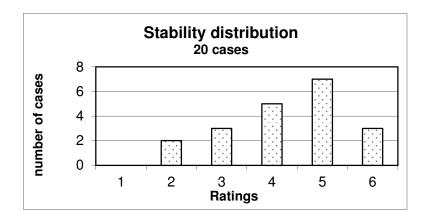
## **Safety**

**Findings:** 95% of cases reviewed were in the acceptable range. This is an increase from last year's score of 88%. There was only one case that received an unacceptable score on safety. This case involved a young boy who had reportedly witnessed domestic violence between his mother and her paramour on the evening prior to the review. This allegation was resulted in a referral to Child Protective Services during the review.



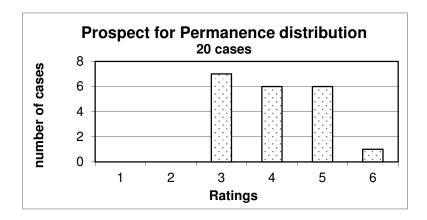
## **Stability**

**Findings:** 75% of cases reviewed were in the acceptable range. This is a modest increase from last year's score of 71%. There were five cases that received unacceptable scores. All five of the cases also had unacceptable scores on Prospects for Permanency.



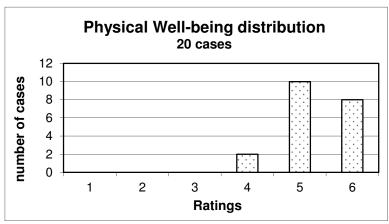
## **Prospects for Permanence**

**Findings:** 65% of cases reviewed were within the acceptable range. This is a slight increase from last year's score of 63%. There were seven cases that received unacceptable scores. Five of the seven cases also had unacceptable scores on Stability. Six of the seven cases were foster care cases and one was an in-home case. The young child in the in-home case was at risk of removal due to safety issues. Of the six foster care cases with unacceptable scores, four were teenagers. Three of the four teenagers had the primary goal of Individualized Permanency. The other two cases involved young children, one with the goal of Adoption and the other with a goal of Return Home. The child with the goal of Adoption has been in three different placements in the past year with disruptions due to the child's behavior. In the case with the goal of Return Home, team members doubted reunification would be successful.



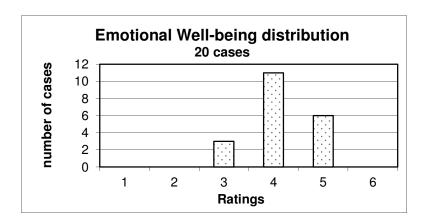
## Health/Physical Well-Being

**Findings:** 100% of cases reviewed were in the acceptable range. This is the same percentage as last year.



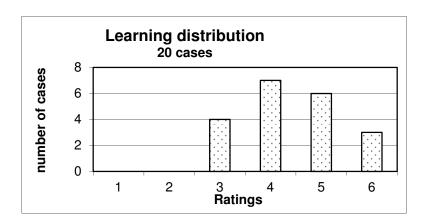
## **Emotional/Behavioral Well-Being**

**Findings:** 85% of cases reviewed were within the acceptable range. This is a decrease from last year's score of 92%.



## **Learning Progress**

**Findings:** 80% of cases reviewed were within the acceptable range. This is a significant decline from last year's score of 92%. Four cases were not acceptable. One of the cases involved a teen whose educational needs were not being addressed due to the questionable quality of educational services provided by the residential program. The other three cases involved children from preschool to middle school who should have been on IEP's, but the IEP either hadn't been transferred from the previous school, hadn't yet been created, or hadn't been renewed.



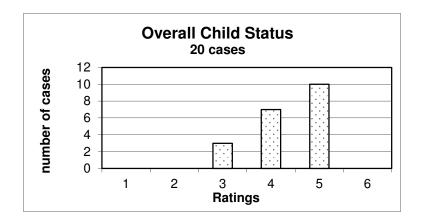
## **Satisfaction**

**Findings:** 100% of cases reviewed were within the acceptable range. This is a substantial increase from last year's score of 79%.



## **Overall Child and Family Status**

**Findings:** 85% of cases reviewed were within the acceptable range. The overall Child and Family Status score decreased slightly from last year's score of 88%; however, the same number of cases were unacceptable this year as last year. One of the three cases had an unacceptable score on Safety, which trumped the overall score. The other two cases had unacceptable scores on Stability, Prospects for Permanency, and Family Connections in addition to an unacceptable score on either Emotional/Behavioral Well-being or Learning Progress.



## **Scores by Role**

This year reviewers were asked to provide separate scores for the child, mother, father, siblings and other/caregiver on two of the Child Status indicators (Family Connections and Satisfaction). The following tables illustrate how the various parties scored on each of these indicators. Children maintained connections with their siblings and mothers in the majority of the cases, but

they maintained a connection with their father in only 33% of the cases. Satisfaction scores were above standard for all the roles and reached 100% for both children and caregivers.

	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Overall Connections	8	4	67%
Siblings	3	2	60%
Mother	5	2	71%
Father	1	2	33%
Other	7	2	78%

	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Overall Satisfaction	20	0	100%
Child	7	0	100%
Mother	11	3	79%
Father	7	1	88%
Caregiver	11	0	100%

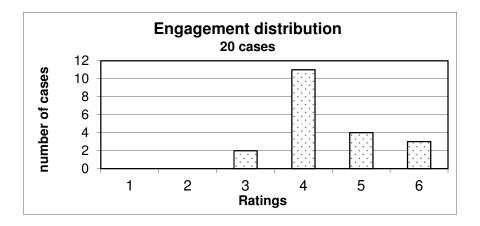
# **System Performance Indicators**

# **Overall System**

Southwest System Performa	nce									
	# of	# of		FY07	FY08	FY09	FY10	FY11	FY12	
	cases	cases	Standard: 70% on all indicators						Current	
	(+)	(-)	Standard: 85% on overall score						Scores	Trends
Engagement	18	2	90.0%	91%	92%	88%	88%	75%	90%	Improved and above standard
Teaming	13	7	65.0%	83%	79%	92%	63%	75%	65%	Decreased and below standard
Assessment	15	5	75.0%	61%	75%	75%	75%	79%	75%	Decreased but above standard
Long-term View	13	7	65.0%	65%	75%	88%	75%	63%	65%	Improved but below standard
Child & Family Plan	16	4	80.0%	83%	88%	83%	83%	75%	80%	Improved and above standard
Intervention Adequacy	16	4	80.0% 85.0%	83%	79%	100%	83%	88%	80%	Decreased but above standard
Tracking & Adapting	17	3	80.0%	74%	88%	88%	71%	79%	85%	Improved and above standard
Overall Score	16	4	<u> </u>	83%	88%	96%	92%	83%	80%	Decreased and below standard
			0% 20% 40% 60% 80% 100%							

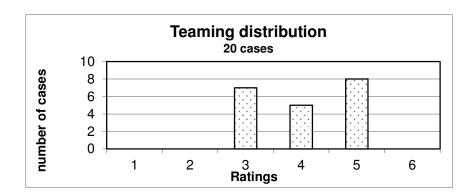
## **Child and Family Engagement**

**Findings:** 90% of cases reviewed were within the acceptable range. This is a substantial increase from last year's score of 75%.



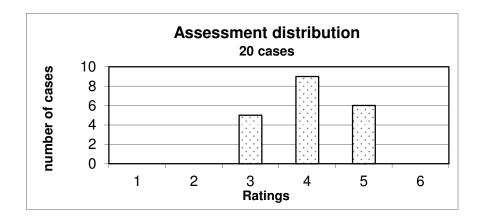
## **Child and Family Team and Coordination**

**Findings:** 65% of cases reviewed were within the acceptable range. This is a decrease from last year's score of 75% and is below the 70% standard. Seven cases had unacceptable scores on teaming. The factor mentioned most often by far in the explanations for the unacceptable scores was that key members were not included in teaming. These were most often the therapist and the school, but reviewers also mentioned that advocates, foster parents, grandparents, partner agencies, and informal supports were also overlooked in forming the team. A few of the stories mentioned lack of information sharing among team members, but it more frequently the case that key members weren't involved at all. Most of the stories, even those with unacceptable scores on Teaming, mentioned that team meetings were being held frequently, but do to the exclusion of key members, the team wasn't working as a cohesive unit and important information wasn't being shared.



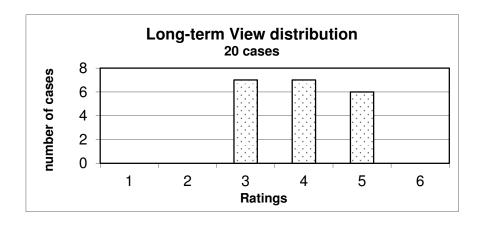
## **Child and Family Assessment**

**Findings:** 75% of cases reviewed were in the acceptable range. This is a slight decrease from last year's score of 79%.



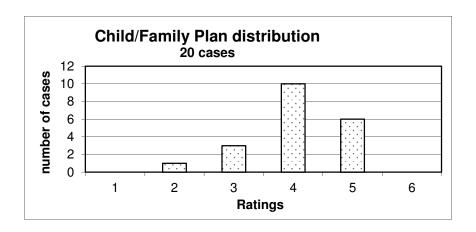
## **Long-Term View**

**Findings:** 65% of cases reviewed were within the acceptable range. This is a slight increase from 63% last year but is below the 70% standard. Seven cases received unacceptable scores on Long-term View. Long-term view measures the likelihood that enduring safety and permanency will be achieved. In some of the cases the identified permanency goal appeared to be unrealistic or unachievable, yet there was not a concurrent plan in place that had the potential to provide permanency. In a couple of the cases there was no path to case closure. In the other cases stability was declining and the prospects for permanency were declining rather than improving.



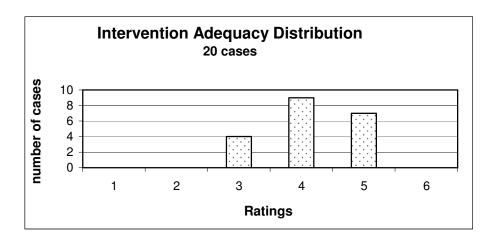
## **Child and Family Planning Process**

**Findings:** 80% of cases reviewed were within the acceptable range. This is an increase from 75% last year. There were four cases that received unacceptable scores on Child and Family Planning.



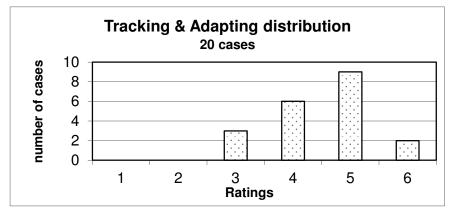
## **Intervention Adequacy**

**Findings:** 80% of cases reviewed were within the acceptable range. This is a decrease from last year's score of 88%.



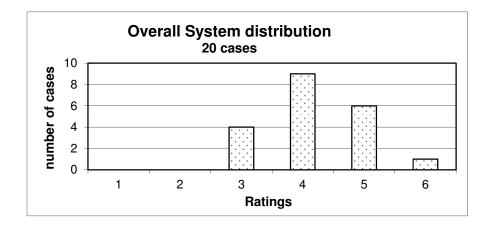
## **Tracking and Adaptation**

**Findings:** 79% of cases reviewed were in the acceptable range. This is an increase over last year's score of 71%.



## **Overall System Performance**

**Findings:** 80% of cases reviewed were within the acceptable range. This is a slight decrease from the score of 83% last year and is below standard. In order for a case to receive an unacceptable score on Overall System Performance, it must have unacceptable scores on more than half of the system indicators. This is a strong indication that Practice Model principles are not being implemented in case practice. Four cases had unacceptable overall scores this year, which is the same number that had unacceptable scores last year.



## **Scores by Role**

This year reviewers were asked to provide separate scores for the child, mother, father and guardian/caregiver on three of the system indicators (Engagement, Assessment, and Intervention Adequacy). The following tables illustrate how the various parties scored on each of these indicators. There was most likely to be acceptable performance around the child on all of these indicators. Mothers were usually engaged, but were only assessed or participating in adequate

interventions on about 50% of the cases. Outcomes for fathers were about the same. They were only engaged on 55% of the cases, only adequately assessed on 60% of the cases, and were participating in adequate interventions on only 40% of the cases. Guardians and caregivers had by far the best outcomes, scoring 90% or 100% on all three indicators.

	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Overall Engagement	18	2	90%
Child	12	2	86%
Mother	12	3	80%
Father	6	5	55%
Guardian	3	0	100%

	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Overall Assessment	15	5	75%
Child	15	5	75%
Mother	5	5	50%
Father	9	6	60%
Caregiver	9	1	90%

	# of	# of	FY12
	cases	cases	Current
	(+)	(-)	Scores
Overall Intervention Adequacy	16	4	80%
Child	16	4	80%
Father	4	6	40%
Mother	7	6	54%
Caregiver	9	1	90%

#### **Outcome Matrix**

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

The desired result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often either unusually resilient or resourceful children and families, or children and families who have

some "champion" or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well (these children and families would fall in Outcome 2).

The outcome matrix for children and families reviewed during the Southwest Region review indicates that 16 of the cases (80%) had acceptable ratings on both Child Status and System Performance. There were three cases (15%) that rated acceptable on child status but unacceptable on system performance. There was one case (5%) that was unacceptable on both child status and system performance.

	Favorable Status of Child Outcome 1	Unfavorable Status of Child Outcome 2	_
Acceptable	Good status for the child,	Poor status for the child,	
System	agency services presently acceptable.	agency services minimally acceptable	
Performance		but limited in reach or efficacy.	
	n= 16	n= 0	
	80.0%	0.0%	80.0%
Unacceptable	Outcome 3	Outcome 4	
System	Good status for the child, agency	Poor status for the child,	
Performance	Mixed or presently unacceptable.	agency presently unacceptable.	
	n= 3	n= 1	
	15.0%	5.0%	20.0%
	95.0%	5.0%	•

## V. Practice Improvement Opportunities

During the Qualitative Case Review process, opportunities for practice improvement were observed and identified regarding the system and case management. At the conclusion of each two-day review period, the reviewers met together for a debriefing session during which a brief outline of each case and the reviewers' observations were presented and discussed with the other reviewers. As part of the debriefing process, each review team was asked to present practice improvement opportunities on their case that could improve case outcomes. The observations have been categorized into some child status and system performance indicators. Some indicators include specific suggestions for improvement based on common themes associated with that indicator.

## **Family Connections**

- Siblings cannot be placed together due to their behavior, but the connection between them needs to be maintained.
- The youth has been placed a great distance from her mother at the insistence of the guardian ad litem.

## **Engaging**

- The father feels everyone at the team meetings is against him.
- Mother does not understand what she needs to do in order to have the child returned home.
- Although the goal is to return home to the father, he has not been engaged and isn't a prominent part of the plan.

### **Teaming**

- The therapist has not been invited to team meetings so he is unaware of behavior the child is exhibiting in the home.
- The team needs to include all of the service providers to prevent mother from triangulating and resolve misunderstandings among team members.
- Team members had different understandings about whether father was drug testing, where he was living, his relationship with his paramour, and the child care arrangements while the father is working. The team members were also misinformed about how the child was doing in school.
- Grandparents who were a support to mother were not participating in teaming.
- The family didn't know what team meetings were and didn't know who the members of their team were.
- The overbearing voice of the attorneys in team meetings is causing the parents to feel unheard. Including more of the parents' informal supports in team meetings may help balance the voices of the various parties.
- Although a youth advocate, group therapist and school teacher are working with the child, team meetings have involved only the caseworker and the family.

#### Assessment

- The new therapist has not received any of the evaluations done by the previous therapist and has not been made aware of a major behavior issue the child is exhibiting in the home.
- The new school has not received the IEP that was prepared by the child's previous school, nor was the new school aware that an IEP had been completed. The caseworker didn't realize the IEP hadn't been transferred from the previous school.
- Mother's underlying needs are not clearly understood and it's unknown why she is so resistant to participating in services.
- DCFS was not aware the child had an IEP in place and the school has not been included in team meetings.
- The child has not been assessed for underlying issues such as depression.
- The therapist is unaware the child is a victim of sexual abuse, so this is not being addressed in therapy.

## **Long-term View**

- The Long-term View needed to include a concurrent plan. For example, a concurrent plan is needed in case kin do not pass the home study and an adoptive home needs to be identified when it's possible reunification won't be successful.
- The team is focused only on developing the youth's independent living skills, they are not paying attention to developing relationships that will endure and create a sense of family and permanency for the youth.
- Although parental rights have been terminated, the child is not placed in an adoptive home and the caseworker isn't working with the Adoption Exchange.

## **Child and Family Plan**

- The worker feels families cannot be included in planning because the plan is determined solely by the assistant attorney general.
- Although the plan had just been updated, it was still very generic.

## **Intervention Adequacy**

- Adoptive home studies take quite a while to complete and need to be done in a timely manner.
- Because kinship placement was not explored quickly, the siblings have been placed in different homes permanently, which has been very upsetting to the family.
- Kinship searches need to be completed on the father's side of the family.
- More efforts could have been made to prevent removal.
- The schooling provided in the residential placement is not meeting the youth's needs.
- The current placement is not a good match for the needs of the youth.
- Due to the rural nature of the community, the resources the family needs are not available.
- The mother's mental health issues are not being treated because she does not have a Medicaid card.

## **Tracking and Adaptation**

• Although father had custody of the child, no one had visited his home since he had relocated a couple of months ago.

## VI. Analysis of the Data

## RESULTS BY CASE TYPE

The following table compares how the different case types performed on some key child status and system performance indicators. As the table illustrates, Foster Care cases scored much better than in-home cases. Thirteen of the 14 Foster Care cases (93%) had acceptable Overall System Performance while only three out of six In-Home cases scored acceptable. In-Home cases scored below standard on every system performance indicator except Engagement. In marked contrast, Foster Care cases scored above standard on every system performance indicator.

Case Type	# in Sample	Safety	Prospects for Permanence	O verall Child Status	E ngagem ent	T eam in g	A ssessm ent	Long-Term View	Child and Family Plan	Intervention A dequacy	Tracking & Adapting	O verall System Perform ance
Foster Care	14	100%	57%	86%	93%	79%	93%	71%	86%	93%	93%	93%
In-Home	6	83%	83%	83%	83%	33%	33%	50%	67%	50%	67%	50%

#### RESULTS BY PERMANENCY GOAL

The following table compares how the different permanency goals performed on some key child status and system performance indicators. There were four different permanency goals represented in the case sample. Consistent with the results just noted above in which In-Home cases struggled on the system performance indicators, cases with the goal of Remain Home, which are the In-Home cases, had the lowest scores on those indicators. It is also worth noting that only one of the four cases with the goal of Individualized Permanency had acceptable permanency, which impacted the Long-term View scores, although they did exceptionally well on all of the other system performance indicators. Cases with the goal of Reunification scored the best on the system performance indicators.

Permanency Goal	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagem en t	Team in g	A ssessment	Long-Term View	Child and Family Plan	Intervention A dequacy	Tracking & Adapting	O verall System Perform ance
Adoption	3	100%	67%	100%	100%	33%	67%	100%	100%	100%	67%	100%
Guardianship	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Individualized Perm.	4	100%	25%	50%	100%	100%	100%	50%	75%	100%	100%	100%
Remain Home	6	83%	83%	83%	83%	33%	33%	50%	67%	50%	67%	50%
Reunification	7	100%	71%	100%	86%	86%	100%	71%	86%	86%	100%	86%

#### RESULTS BY CASEWORKER DEMOGRAPHICS

The following table compares how caseload size affected performance on key child status and system performance indicators. Caseloads in the sample were divided into two categories: caseloads of 16 cases or less and caseloads of 17 cases or more. The case sample suggests that the majority of the caseworkers (70%) have caseloads of 16 cases or less. Contrary to expectations, the higher caseloads of 17 cases or more outperformed the lower caseloads of 16 cases or less on Overall System Performance. Caseloads of 16 cases or less scored below the 70% standard on Prospects for Permanence, Teaming, Assessment, Long-term View and Overall System Performance. All three of the In-Home cases that had unacceptable Overall System Performance were from workers who had fewer than 16 cases, which accounts for most of the lower scores. Feedback from the region also provides some insight into why workers with higher caseloads may perform better on system performance indicators. The region reports that better performing workers tend to be given more cases. Also, difficult cases are often assigned to workers with lower caseloads due to the amount of time required to work difficult cases.

Caseload Size	# in Sample	Safety	Prospects for Permanence	O verall Child Status	Engagem ent	T eam in g	A ssessm en t	Long-Term View	Child and Family Plan	Intervention A dequacy	Tracking & Adapting	O verall System Perform ance
16 cases or less	14	93%	57%	86%	86%	57%	64%	57%	86%	71%	79%	71%
17 cases or more	6	100%	83%	83%	100%	83%	100%	83%	67%	100%	100%	100%

The following table compares how length of employment as a caseworker impacts performance on some key child status and system performance indicators. The majority of caseworkers included in the sample (75%) had more than two years experience as a caseworker. The data suggests that individual worker's level of performance is more of a factor in determining outcomes than the amount of time they have been employed as a caseworker. Longevity did not equate consistently with improved performance.

Length of Employment in Current Position	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagem ent	Team in g	A ssessm ent	Long.Term View	Child and Family Plan	Intervention A dequacy	Tracking & Adapting	O verall System Performance
Less than 12 months	4	100%	75%	100%	75%	50%	75%	50%	75%	75%	100%	75%
12 to 24 months	1	0%	0%	0%	5%	0%	0%	0%	5%	0%	5%	0%
24 to 36 months	2	100%	100%	100%	100%	100%	100%	100%	50%	100%	100%	100%
36 to 48 months	8	100%	75%	88%	88%	50%	63%	75%	88%	75%	63%	75%
48 to 60 months	1	100%	0%	0%	100%	100%	100%	0%	0%	100%	100%	100%
60 to 72 months	1	100%	0%	100%	100%	100%	100%	100%	100%	100%	100%	100%
More than 72 months	3	100%	67%	100%	100%	100%	100%	67%	100%	100%	100%	100%

#### **RESULTS BY OFFICE**

The following table compares how different region offices performed on some key child status and system performance indicators. Cases from six of the seven offices in the Southwest Region were selected as part of the sample. Three offices (Beaver, Kanab, and Richfield) scored 100% on both Overall Child Status and Overall System Performance. It is difficult to draw conclusions about performance when offices have only a case or two in the review. In the larger offices it's worth nothing that only two out of five of the plans from the Cedar City office were acceptable, and the St. George office struggled on Teaming and Assessment. The four cases that had unacceptable Overall System Performance came from across the region (Cedar City, St. George, and Manti), there was no single office that clearly struggled more than the others. Similarly, the four cases had four different supervisors.

Office	# in Sample	Safety	Prospects for Permanence	Overall Child Status	E ngagem ent	T eam in g	A ssessment	Long-Term View	Child and Family Plan	Intervention A dequacy	Tracking & Adapting	O verall System Perform ance
Beaver	1	100%	100%	100%	100%	0%	100%	100%	100%	100%	100%	100%
Cedar City	5	100%	60%	80%	80%	80%	100%	60%	40%	80%	100%	80%
Kanab	1	100%	0%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Manti	2	100%	50%	50%	100%	50%	50%	0%	50%	50%	50%	50%
Panguitch	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Richfield	2	100%	50%	100%	100%	50%	50%	0%	100%	100%	100%	100%
St. George	9	89%	67%	89%	89%	67%	67%	89%	100%	78%	78%	78%

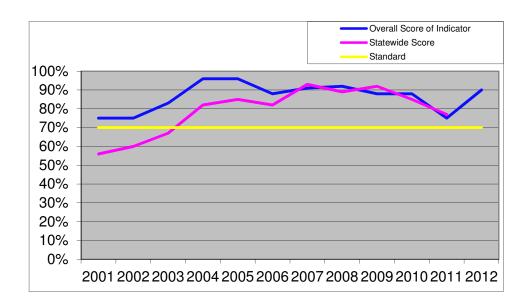
#### SYSTEM INDICATORS

How are the ratings of 1 (completely unacceptable), 2 (substantially unacceptable), 3 (partially unacceptable), 4 (minimally acceptable), 5 (substantially acceptable) and 6 (optimal) trending within the system indicators? Below is data for System Indicators (Engagement, Teaming, Assessment, Long-term View, Child and Family Plan, Intervention Adequacy, and Tracking and Adaptation) over the last 12 years. The first chart in each indicator section below includes an average of the scores for that indicator, the percentage of the indicator that scored within the acceptable range, and the Statewide Score for that indicator. The Statewide average score for 2012 will not be available until the end of the review cycle (May 2012). The yellow line represents the 70% standard set for system performance indicators. The most ideal trend would be to see an increase in the average score of the indicators along with an increase in the overall percentage of indicators scoring in the acceptable range.

## **Engagement**

As demonstrated in the chart and line graph below, the overall score of Engagement (historically called Child and Family Participation) has never been below the 70% standard. The indicator had been experiencing a three-year decline in the average score, but that trend was reversed this year when the average score jumped to 4.4 and the percentage jumped to 90%.

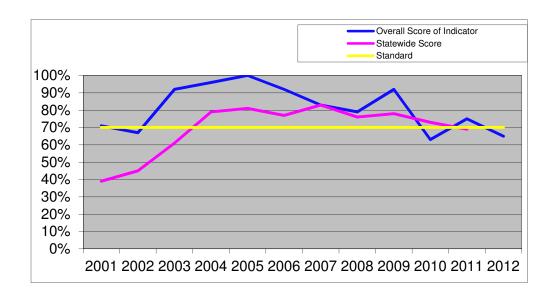
	Engagement														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012			
Average Score of Indicator	4.29	3.96	4.54	4.88	5.00	4.63	4.43	4.54	4.54	4.33	4.04	4.40			
Overall Score of Indicator	75%	75%	83%	96%	96%	88%	91%	92%	88%	88%	75%	90%			
Statewide Score	56%	60%	67%	82%	85%	82%	93%	89%	92%	85%	77%				



## **Teaming**

As demonstrated in the chart and line graph below, the Teaming indicator experienced a significant increase in 2009 in the overall score, which was followed up by a 29-point drop in 2010. It regained some ground in 2011, than slipped back again this year, falling below standard.

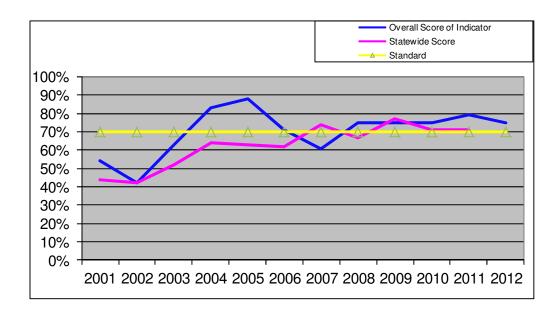
	Teaming													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012		
Average Score of Indicator	4.00	3.88	4.63	4.63	5.00	4.63	4.17	4.17	4.42	4.00	4.08	4.05		
Overall Score of Indicator	71%	67%	92%	96%	100%	92%	83%	79%	92%	63%	75%	65%		
Statewide Score	39%	45%	61%	79%	81%	77%	83%	76%	78%	73%	69%			



#### Assessment

As indicated in the chart and line graph below, the Assessment indicator has been above the 70% standard for the past five years been at a nearly identical level over those five years.

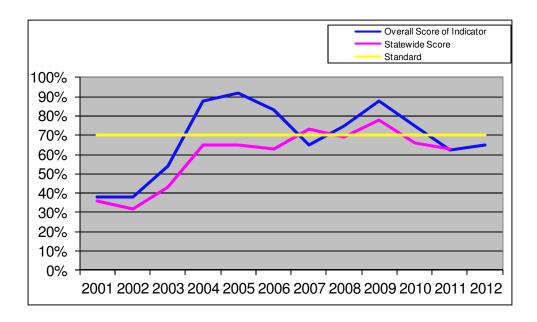
	Assessment													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012		
Average Score of														
Indicator	3.83	3.42	3.96	4.25	4.54	4.29	3.83	4.13	4.04	3.96	4.04	4.00		
Overall Score of														
Indicator	54%	42%	63%	83%	88%	71%	61%	75%	75%	75%	79%	75%		
Statewide Score	44%	42%	52%	64%	63%	62%	74%	67%	77%	71%	71%			



## **Long-Term View**

As demonstrated in the chart and line graph below, the Long-term View indicator experienced a sharp two-year decline in both the average score and overall score in 2010 and 2011 and remained below standard this year. This is surprising since it had been above standard from 2008-2010.

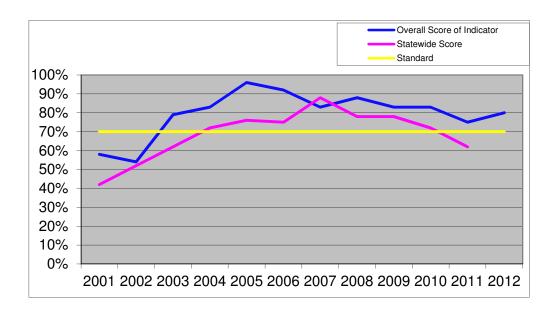
	Long-Term View														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012			
Average Score of Indicator	3.42	3.13	3.83	4.42	4.54	4.38	3.83	4.08	4.29	4.13	3.92	3.95			
Overall Score of Indicator	38%	38%	54%	88%	92%	83%	65%	75%	88%	75%	63%	65%			
Statewide Score	36%	32%	43%	65%	65%	63%	73%	69%	78%	66%	63%				



## **Child and Family Plan**

As indicated in the chart and line graph below, the Child and Family Plan indicator has been above the 70% standard for the past ten years. In 2011, the indictor dropped into the 70<sup>th</sup> percentile for the first time since 2003. This is noteworthy since other regions are struggling with this indicator and falling below standard. Southwest Region is doing especially good work on their Child and Family Plans, as shown in the line graph that compares their scores to the statewide scores.

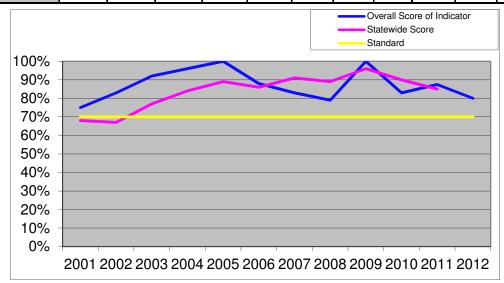
	Child and Family Plan														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012			
Average Score of Indicator	3.79	3.63	4.17	4.38	4.71	4.58	4.13	4.29	4.21	4.21	4.04	4.05			
Overall Score of Indicator	58%	54%	79%	83%	96%	92%	83%	88%	83%	83%	75%	80%			
Statewide Score	42%	52%	62%	72%	76%	75%	88%	78%	78%	72%	62%				



## **Intervention Adequacy**

As demonstrated in the chart and line graph below, the Intervention Adequacy indicator has always been well above the 70% standard. It continues to be one of the highest scoring system performance indicators for both the region and the state. Both the average and the overall scores declined this year, but remained above standard.

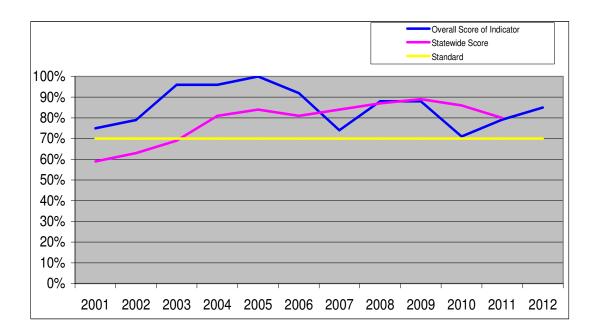
	Intervention Adequacy														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012			
Average Score of Indicator	4.08	4.21	4.63	4.75	5.04	4.54	4.17	4.33	4.75	4.54	4.21	4.15			
Overall Score of Indicator	75%	83%	92%	96%	100%	88%	83%	79%	100%	83%	88%	80%			
Statewide Score	68%	67%	77%	84%	89%	86%	91%	89%	96%	90%	85%				



## **Tracking and Adaptation**

As indicated in the chart and line graph below, the Tracking and Adaptation indicator has always been above the 70% standard. The region has experienced two consecutive years of increasing scores after hitting a low in 2010.

	Tracking and Adaptation														
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012			
Average Score of Indicator	4.33	4.29	4.92	4.88	5.21	4.67	4.00	4.38	4.58	4.21	4.25	4.50			
Overall Score of Indicator	75%	79%	96%	96%	100%	92%	74%	88%	88%	71%	79%	85%			
Statewide Score	59%	63%	69%	81%	84%	81%	84%	87%	89%	86%	80%				



## **VII. Summary and Recommendations**

## **Summary**

During the FY2012 Southwest Region Qualitative Case Review (QCR), numerous strengths were identified about child welfare practice in the Southwest Region. During the QCR review, several opportunities for practice improvement were also identified that could improve and enhance the services being provided by the Southwest Region.

In regards to the child status indicators, the Region just met the 85% standard for Overall Child Status with a score of 85%. This was a slight decrease from last's year's score of 88%. The region has maintained the Overall Child Status score at or above the 85% standard for the eleventh year in a row. Six of the eight child status indicators performed above standard with scores ranging from 75% to 100%. Only two Child Status indicators fell below standard: Prospects for Permanency and Family Connections.

Overall System Performance fell below the 85% standard with a score of 80%. Five of the seven system performance indicators fell below the 70% standard: Teaming (65%) and Long-term View (65%). The Region's Overall System Performance score decreased slightly from 83% last year to 80% this year. This is the second year that Overall System Performance has fallen below standard. The Overall System Performance score was impacted heavily by a couple of cases that were so close to passing that a score change of one point on one indicator made the difference between the case scoring acceptable or unacceptable. Also, this year there were only 20 cases in the sample rather than the usual 24, so each case impacted the overall score by 5% rather than 4%.

#### **Recommendations**

- 1. In-home cases had a substantial negative impact on the results of the review this year inasmuch as three of the six in-home cases (50%) scored unacceptable on Overall System Performance. This significantly impacted the scores on all of the System Performance indicators. Using the stories to evaluate the reasons for sub-standard outcomes on these cases may reveal patterns of performance that could be addressed to improve outcomes for children and families.
- 2. The Teaming score fell below standard in spite of the region's concerted efforts to improve scores in that area. Workers seem to be trying to improve Teaming by increasing the frequency of meetings while paying insufficient attention to identifying and involving all of the key members and assuring that those members are all sharing important information about the child and family.
- 3. The Prospects for Permanency and Long-term View scores are integrally related and both fell below standard this year. Three of the seven cases with unacceptable scores were teens with the goal of Individualized Permanency. Reviewing these stories may bring to light factors that are especially affecting permanency for teens. Better concurrent planning on cases would strengthen the Long-term View in the event the primary permanency goal cannot be achieved.